

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 -/ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	6/17/68
2	✓	✓	6/17/68
3	✓	✓	6/17/68
4	✓	✓	6/17/68
5	✓	✓	6/17/68
6	✓	✓	6/17/68
7	✓	✓	6/17/68
8	✓	✓	6/17/68
9	✓	✓	6/17/68
10	✓	✓	6/17/68
11	✓	✓	6/17/68
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Claim	Final	Original	Date
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